- 1							
	DECLARATION FOR ence to PCT Internation	R PATENT APPLICATION AND In all Applications)	POWER OF ATTORNEY	ATTORNEYS DOCKET NUMBER GULDE-0054			
As a below name	ed inventor, I hereby dec	clare that:					
My resider	nce, post office address a	and citizenship are as stated below next	to my name.				
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
	USE OF DOPAMINE PARTIAL AGONISTS FOR TREATMENT OF THE RESTLESS LEG SYNDROME AND CORRESPONDING PHARMACEUTICAL PREPARATION						
the specific	cation of which (check o	only one item below):					
	is attached hereto.						
$\boxtimes$	was filed as United Stat	es application					
	Serial No. <u>10/517,435</u>						
	on <b>December 10, 2004</b>						
	and was amended						
	on(if applicable	).					
	was filed as PCT intern	ational application					
Number							
on,							
	and was amended under PCT Article 19						
on (if applicable).							
	tate that I have reviewed by any amendment refer	and understand the contents of the ab	ove-identified specification, inclu	ding the claims, as			
continuation	on-in-part applications, r	e information which is material to pate naterial information which became avai iling date of the continuation-in-part ap	lable between the filing date of the p	1.56, including for orior application and			
inventor's country ot application	or plant breeder's rights her than the United State n for patent, inventor's or	nefits under 35 U.S.C. 119(a)-(d) or (f certificate(s), or 365(a) of any PCT in es of America, listed below and have al r plant breeder's rights certificate(s), or hich priority is claimed.	ternational application which des	ignated at least one he box, any foreign			
PRIOR FOREIGN	APPLICATION NUMBER(S)	COUNTRY	FOREIGN FILING DATE (MM/DD/YYYY)	PRIORITY NOT CLAIMED			
10226459.7		Germany	06/13/2002				
				H			
	ciated with <u>Customer I</u>	l inventor, I hereby appoint the attorney Number 23599 to prosecute this applica					
Send Correspo	ondence to:Customer No.	<b>Telephone No.</b> 703/243-6333	Direct Telephone	Calls to:			

## Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER
GULDE-0054

POLL NAME OF INVENTOR OF INVENTOR OF INVENTOR OF INVENTOR  RESIDENCE & CITY Berlin  COUNTRY OF CITIZENSHIP D-14057, Germany  D-14057, Germany  SECOND GIVEN NAME FAMILY NAME HOROWSKI  RESIDENCE & CITY RESIDENCE & CITY STATE OR FOREIGN COUNTRY Germany  COUNTRY OF CITIZENSHIP POST OFFICE ADDRESS  TREET CITY STATE OR FOREIGN COUNTRY Germany  STATE & ZIP CODE/COUNTRY STATE & ZIP CODE/COUNTRY COUNTRY OF CITIZENSHIP CITY STATE & ZIP CODE/COUNTRY SECOND GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME CITY STATE & ZIP CODE/COUNTRY COUNTRY OF CITIZENSHIP CZech Republic  CZech Republic  TOTY TOTAL STATE & ZIP CODE/COUNTRY TACK  RESIDENCE & CITY TACK  RESIDENCE & CITY TACK TACK  TACK  OR RESIDENCE & CITY TACK  TACK  TACK  TACK  STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CZech Republic CZech R						
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PRESIDENCE & COUNTRY OF CITIZENSHIP Germany   COUNTRY OF CITIZENSHIP GERMAN	2	OF INVENTOR	KRANDA	Karel		
TREET CODESCIPENTS  POST OFFICE ADDRESS  FILL NAME OF INVESTOR  FOR INVE	L	DESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
FOST OFFICE ADDRESS  PULL NAME  PULL NAME  POST OFFICE ADDRESS  PULL NAME  POST OFFICE ADDRESS  POST OFFICE ADDRES	- 1		Berlin		Great Britain	
POST OFFICE ADDRESS  Leonhardstrasse 5  Berlin  D-14057, Germany  D-14057, Germany  FIRST GIVEN NAME Reinhard  CTY  STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP  POST OFFICE ADDRESS  STREET CITY STATE OR FOREIGN COUNTRY FOREIGN COUNTRY FOREIGN COUNTRY FOREIGN COUNTRY COUNTRY OF CITIZENSHIP FOREIGN COUNTRY FOREIGN COUNTRY FOREIGN COUNTRY FOREIGN COUNTRY OF CITIZENSHIP FOREIGN COUNTRY FOREIGN COUNTRY OF CITIZENSHIP FOREIGN COUNTRY FAMILY NAME FIRST GIVEN NA			erb bur		CONTRACTOR CONTRACTOR CONTRACTOR	
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POLL NAME OF INVENTOR  TACK  POST OFFICE ADDRESS  POST OFFICE OF INVENTOR  TOUL NAME OF ITIZENSHIP  TOUL NAME OF INVENTOR  TOUL NAME OF I		ADDRESS		Berlin	D-14057, Germany	
Country of Citizenship   Country of Country of Country of Country of Country of Country   Country of Citizenship   Coun		FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
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## Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEYS DOCKET NUMBER GULDE-0054

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	
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RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	DATE 24.2.05	SIGNATURE OF INVENTOR 207	DATE
Kenhwa / Own	22, 7,0S	SIGNATURE OF INVENTOR 208	DATE
signature of inventor 203	3, 3, 05	SIGNATURE OF INVENTOR 209	DATE
SIGNATURE OF INVENTOR 204	21.2.05	SIGNATURE OF INVENTOR 210	DATE
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENTOR 211	DATE
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE